



February 17, 2012

ENGROSSED SENATE BILL No. 12

DIGEST OF SB 12 (Updated February 15, 2012 6:20 pm - DI 77)

Citations Affected: IC 2-5; IC 4-22; IC 12-7; IC 12-8; IC 12-9; IC 12-9.1; IC 12-10; IC 12-12; IC 12-12.7; IC 12-13; IC 12-14; IC 12-15; IC 12-21; IC 16-28; IC 22-4.1.

Synopsis: Reestablishment of FSSA. Reestablishes the office of the secretary of family and social services (office) and other divisions and offices within FSSA. Removes certain emergency rule making authority previously authorized for the office concerning federal programs administered by the office. Adds emergency rule making authority for the office to comply with the federal Patient Protection and Affordable Care Act. Makes technical corrections. (The introduced version of this bill was prepared by the health finance commission.)

Effective: Upon passage; July 1, 2012.

Miller, Gard

(HOUSE SPONSORS — CLERE, BROWN T)

January 4, 2012, read first time and referred to Committee on Health and Provider Services.

January 25, 2012, amended, reported favorably — Do Pass.

January 30, 2012, read second time, amended, ordered engrossed.

January 31, 2012, engrossed. Read third time, passed. Yeas 44, nays 6.

HOUSE ACTION

February 9, 2012, read first time and referred to Committee on Public Health.

February 16, 2012, reported — Do Pass.

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ES 12—LS 6058/DI 104+



February 17, 2012

Second Regular Session 117th General Assembly (2012)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2011 Regular Session of the General Assembly.

ENGROSSED SENATE BILL No. 12

A BILL FOR AN ACT to amend the Indiana Code concerning human services.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 2-5-26-2 IS AMENDED TO READ AS FOLLOWS
2 [EFFECTIVE UPON PASSAGE]: Sec. 2. As used in this chapter,
3 "office" refers to the office of Medicaid policy and planning established
4 by ~~IC 12-8-6-1~~. **IC 12-8-6.5-1.**
- 5 SECTION 2. IC 4-22-2-37.1, AS AMENDED BY P.L.229-2011,
6 SECTION 58, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
7 UPON PASSAGE]: Sec. 37.1. (a) This section applies to a rulemaking
8 action resulting in any of the following rules:
- 9 (1) An order adopted by the commissioner of the Indiana
10 department of transportation under IC 9-20-1-3(d) or
11 IC 9-21-4-7(a) and designated by the commissioner as an
12 emergency rule.
- 13 (2) An action taken by the director of the department of natural
14 resources under IC 14-22-2-6(d) or IC 14-22-6-13.
- 15 (3) An emergency temporary standard adopted by the
16 occupational safety standards commission under
17 IC 22-8-1.1-16.1.

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- 1 (4) An emergency rule adopted by the solid waste management
- 2 board under IC 13-22-2-3 and classifying a waste as hazardous.
- 3 (5) A rule, other than a rule described in subdivision (6), adopted
- 4 by the department of financial institutions under IC 24-4.5-6-107
- 5 and declared necessary to meet an emergency.
- 6 (6) A rule required under IC 24-4.5-1-106 that is adopted by the
- 7 department of financial institutions and declared necessary to
- 8 meet an emergency under IC 24-4.5-6-107.
- 9 (7) A rule adopted by the Indiana utility regulatory commission to
- 10 address an emergency under IC 8-1-2-113.
- 11 (8) An emergency rule adopted by the state lottery commission
- 12 under IC 4-30-3-9.
- 13 (9) A rule adopted under IC 16-19-3-5 or IC 16-41-2-1 that the
- 14 executive board of the state department of health declares is
- 15 necessary to meet an emergency.
- 16 (10) An emergency rule adopted by the Indiana finance authority
- 17 under IC 8-21-12.
- 18 (11) An emergency rule adopted by the insurance commissioner
- 19 under IC 27-1-23-7 or IC 27-1-12.1.
- 20 (12) An emergency rule adopted by the Indiana horse racing
- 21 commission under IC 4-31-3-9.
- 22 (13) An emergency rule adopted by the air pollution control
- 23 board, the solid waste management board, or the water pollution
- 24 control board under IC 13-15-4-10(4) or to comply with a
- 25 deadline required by or other date provided by federal law,
- 26 provided:
- 27 (A) the variance procedures are included in the rules; and
- 28 (B) permits or licenses granted during the period the
- 29 emergency rule is in effect are reviewed after the emergency
- 30 rule expires.
- 31 (14) An emergency rule adopted by the Indiana election
- 32 commission under IC 3-6-4.1-14.
- 33 (15) An emergency rule adopted by the department of natural
- 34 resources under IC 14-10-2-5.
- 35 (16) An emergency rule adopted by the Indiana gaming
- 36 commission under IC 4-32.2-3-3(b), IC 4-33-4-2, IC 4-33-4-3,
- 37 IC 4-33-4-14, IC 4-33-22-12, or IC 4-35-4-2.
- 38 (17) An emergency rule adopted by the alcohol and tobacco
- 39 commission under IC 7.1-3-17.5, IC 7.1-3-17.7, or
- 40 IC 7.1-3-20-24.4.
- 41 (18) An emergency rule adopted by the department of financial
- 42 institutions under IC 28-15-11.

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(19) An emergency rule adopted by the office of the secretary of family and social services under ~~IC 12-8-1-12~~ **IC 12-8-1.5-11 or in order to comply with the federal Patient Protection and Affordable Care Act.**

(20) An emergency rule adopted by the office of the children's health insurance program under IC 12-17.6-2-11.

(21) An emergency rule adopted by the office of Medicaid policy and planning under IC 12-15-41-15.

(22) An emergency rule adopted by the Indiana state board of animal health under IC 15-17-10-9.

(23) An emergency rule adopted by the board of directors of the Indiana education savings authority under IC 21-9-4-7.

(24) An emergency rule adopted by the Indiana board of tax review under IC 6-1.1-4-34 (repealed).

(25) An emergency rule adopted by the department of local government finance under IC 6-1.1-4-33 (repealed).

(26) An emergency rule adopted by the boiler and pressure vessel rules board under IC 22-13-2-8(c).

(27) An emergency rule adopted by the Indiana board of tax review under IC 6-1.1-4-37(l) (repealed) or an emergency rule adopted by the department of local government finance under IC 6-1.1-4-36(j) (repealed) or IC 6-1.1-22.5-20.

(28) An emergency rule adopted by the board of the Indiana economic development corporation under IC 5-28-5-8.

(29) A rule adopted by the department of financial institutions under IC 34-55-10-2.5.

(30) A rule adopted by the Indiana finance authority:

(A) under IC 8-15.5-7 approving user fees (as defined in IC 8-15.5-2-10) provided for in a public-private agreement under IC 8-15.5;

(B) under IC 8-15-2-17.2(a)(10):

(i) establishing enforcement procedures; and

(ii) making assessments for failure to pay required tolls;

(C) under IC 8-15-2-14(a)(3) authorizing the use of and establishing procedures for the implementation of the collection of user fees by electronic or other nonmanual means; or

(D) to make other changes to existing rules related to a toll road project to accommodate the provisions of a public-private agreement under IC 8-15.5.

(31) An emergency rule adopted by the board of the Indiana health informatics corporation under IC 5-31-5-8.

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(32) An emergency rule adopted by the department of child services under IC 31-25-2-21, IC 31-27-2-4, IC 31-27-4-2, or IC 31-27-4-3.

(33) An emergency rule adopted by the Indiana real estate commission under IC 25-34.1-2-5(15).

(34) A rule adopted by the department of financial institutions under IC 24-4.4-1-101 and determined necessary to meet an emergency.

(35) An emergency rule adopted by the state board of pharmacy regarding returning unused medication under IC 25-26-23.

(36) An emergency rule adopted by the department of local government finance under IC 6-1.1-12.6 or IC 6-1.1-12.8.

~~(37) An emergency rule adopted by the office of the secretary of family and social services or the office of Medicaid policy and planning concerning the following:~~

~~(A) Federal Medicaid waiver program provisions.~~

~~(B) Federal programs administered by the office of the secretary.~~

(b) The following do not apply to rules described in subsection (a):

(1) Sections 24 through 36 of this chapter.

(2) IC 13-14-9.

(c) After a rule described in subsection (a) has been adopted by the agency, the agency shall submit the rule to the publisher for the assignment of a document control number. The agency shall submit the rule in the form required by section 20 of this chapter and with the documents required by section 21 of this chapter. The publisher shall determine the format of the rule and other documents to be submitted under this subsection.

(d) After the document control number has been assigned, the agency shall submit the rule to the publisher for filing. The agency shall submit the rule in the form required by section 20 of this chapter and with the documents required by section 21 of this chapter. The publisher shall determine the format of the rule and other documents to be submitted under this subsection.

(e) Subject to section 39 of this chapter, the publisher shall:

(1) accept the rule for filing; and

(2) electronically record the date and time that the rule is accepted.

(f) A rule described in subsection (a) takes effect on the latest of the following dates:

(1) The effective date of the statute delegating authority to the agency to adopt the rule.

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(2) The date and time that the rule is accepted for filing under subsection (e).

(3) The effective date stated by the adopting agency in the rule.

(4) The date of compliance with every requirement established by law as a prerequisite to the adoption or effectiveness of the rule.

(g) Subject to subsection (h), IC 14-10-2-5, IC 14-22-2-6, IC 22-8-1.1-16.1, and IC 22-13-2-8(c), and except as provided in subsections (j), (k), and (l), a rule adopted under this section expires not later than ninety (90) days after the rule is accepted for filing under subsection (e). Except for a rule adopted under subsection (a)(13), (a)(24), (a)(25), or (a)(27), the rule may be extended by adopting another rule under this section, but only for one (1) extension period. The extension period for a rule adopted under subsection (a)(28) may not exceed the period for which the original rule was in effect. A rule adopted under subsection (a)(13) may be extended for two (2) extension periods. Subject to subsection (j), a rule adopted under subsection (a)(24), (a)(25), or (a)(27) may be extended for an unlimited number of extension periods. Except for a rule adopted under subsection (a)(13), for a rule adopted under this section to be effective after one (1) extension period, the rule must be adopted under:

(1) sections 24 through 36 of this chapter; or

(2) IC 13-14-9;

as applicable.

(h) A rule described in subsection (a)(8), (a)(12), ~~(a)(19)~~, ~~(a)(20)~~, ~~(a)(21)~~, or (a)(29) ~~or (a)(37)~~ expires on the earlier of the following dates:

(1) The expiration date stated by the adopting agency in the rule.

(2) The date that the rule is amended or repealed by a later rule adopted under sections 24 through 36 of this chapter or this section.

(i) This section may not be used to readopt a rule under IC 4-22-2.5.

(j) A rule described in subsection (a)(24) or (a)(25) expires not later than January 1, 2006.

(k) A rule described in subsection (a)(28) expires on the expiration date stated by the board of the Indiana economic development corporation in the rule.

(l) A rule described in subsection (a)(30) expires on the expiration date stated by the Indiana finance authority in the rule.

(m) A rule described in subsection (a)(5) or (a)(6) expires on the date the department is next required to issue a rule under the statute authorizing or requiring the rule.

SECTION 3. IC 12-7-1-5, AS ADDED BY P.L.220-2011,

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SECTION 252, IS AMENDED TO READ AS FOLLOWS
[EFFECTIVE JULY 1, 2012]: Sec. 5. Actions taken under IC 12-8-1
(**expired**), IC 12-8-2 (**expired**), IC 12-8-6 (**expired**), and IC 12-8-8
(**expired**) after June 30, 1999, and before December 1, 1999, are
legalized and validated to the extent that those actions would have been
legal and valid if P.L.7-2000 had been enacted before July 1, 1999.

SECTION 4. IC 12-7-2-23 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 23. "Body", for
purposes of ~~IC 12-8-2~~, **IC 12-8-2.5**, has the meaning set forth in
~~IC 12-8-2-1~~. **IC 12-8-2.5-1**.

SECTION 5. IC 12-7-2-99, AS AMENDED BY P.L.141-2006,
SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
UPON PASSAGE]: Sec. 99. "A person with a disability" means, for
purposes of the following statutes, an individual who has a physical or
mental disability and meets the program eligibility requirements of the
division of disability and rehabilitative services:

(1) ~~IC 12-8-1-11~~. **IC 12-8-1.5-10**.

(2) IC 12-12-1.

(3) IC 12-12-6.

SECTION 6. IC 12-7-2-129 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 129. "Member", for
purposes of ~~IC 12-8-2~~, **IC 12-8-2.5**, has the meaning set forth in
~~IC 12-8-2-2~~. **IC 12-8-2.5-2**.

SECTION 7. IC 12-7-2-134, AS AMENDED BY P.L.117-2008,
SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
UPON PASSAGE]: Sec. 134. "Office" means the following:

(1) Except as provided in subdivisions (2) through (4), the office
of Medicaid policy and planning established by ~~IC 12-8-6-1~~.
IC 12-8-6.5-1.

(2) For purposes of IC 12-10-13, the meaning set forth in
IC 12-10-13-4.

(3) For purposes of IC 12-15-13, the meaning set forth in
IC 12-15-13-0.4.

(4) For purposes of IC 12-17.6, the meaning set forth in
IC 12-17.6-1-4.

SECTION 8. IC 12-7-2-135 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 135. "Office of the
secretary" refers to the office of the secretary of family and social
services established by ~~IC 12-8-1-1~~. **IC 12-8-1.5-1**.

SECTION 9. IC 12-7-2-160 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 160. (a)
"Rehabilitation", for purposes of the statutes listed in subsection (b),



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means a process of providing services to meet the current and future needs of persons with disabilities so that the individuals may prepare for and engage in gainful employment to the extent of their capabilities, as provided in 29 U.S.C. 720.

(b) This section applies to the following statutes:

(1) ~~IC 12-8-1-11~~; **IC 12-8-1.5-10.**

(2) IC 12-12-1.

(3) IC 12-12-3.

(4) IC 12-12-6.

SECTION 10. IC 12-7-2-172 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 172. (a) Except as provided in subsection (b), "secretary" refers to the secretary of family and social services appointed under ~~IC 12-8-1-2~~; **IC 12-8-1.5-2.**

(b) "Secretary", for purposes of IC 12-13-14, has the meaning set forth in IC 12-13-14-1.

SECTION 11. IC 12-7-2-186 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 186. "State plan", for purposes of ~~IC 12-8-6~~; **IC 12-8-6.5**, refers to the state Medicaid plan for the Medicaid program.

SECTION 12. IC 12-8-1.5 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]:

Chapter 1.5. Office of Secretary of Family and Social Services

Sec. 0.3. (a) Actions taken under IC 12-8-1 (expired), after December 31, 2007, and before March 24, 2008, are legalized and validated to the extent that those actions would have been legal and valid if P.L.113-2008 had been enacted before January 1, 2008.

(b) Actions taken under IC 12-8-1 (expired) after June 30, 2011, are legalized and validated to the extent that those actions would have been legal and valid if IC 12-8-1 had not expired on June 30, 2011.

Sec. 1. (a) The office of the secretary of family and social services is established.

(b) The office of the secretary includes the following:

(1) The secretary.

(2) Each office.

Sec. 2. The governor shall appoint the secretary of family and social services to coordinate family and social service programs among the divisions.

Sec. 3. (a) The secretary has administrative responsibility for the office of the secretary.

(b) Subject to this article, the secretary may organize an office



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to perform the duties of the office.

Sec. 4. The secretary, with the approval of the budget agency, may hire personnel necessary to perform the duties of each office.

Sec. 5. (a) The secretary, through the offices, is responsible for coordinating the provision of technical assistance to each division for the following:

- (1) Compiling program budgets for each division.
- (2) Fiscal performance of each division.
- (3) Management and administrative performance of each division.
- (4) Program performance of each division.

(b) The secretary, through the offices, is accountable for the following:

- (1) Resolution of administrative, jurisdictional, or policy conflicts among the divisions.
- (2) The coordination of the activities of each division with other entities, including the general assembly and other state agencies.
- (3) Coordination of communication with the federal government and the governments of other states.
- (4) Development and ongoing monitoring of a centralized management information system and a centralized training system for orientation and cross-training.
- (5) The overall policy development and management of the state Medicaid plan under IC 12-15.
- (6) Liaison activities with other governmental entities and private sector agencies.

Sec. 6. (a) The secretary and the commissioner of the state department of health shall cooperate to coordinate family and social services programs with related programs administered by the state department of health.

(b) The secretary, in cooperation with the commissioner of the state department of health, is accountable for the following:

- (1) Resolving administrative, jurisdictional, or policy conflicts between a division and the state department of health.
- (2) Formulating overall policy for family, health, and social services in Indiana.
- (3) Coordinating activities between the programs of the division of family resources and the maternal and child health programs of the state department of health.
- (4) Coordinating activities concerning long term care between the division of disability and rehabilitative services and the



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state department of health.

(5) Developing and implementing a statewide family, health, and social services plan that includes a set of goals and priorities.

Sec. 7. The secretary, through the offices, may do the following:

(1) Employ experts and consultants to carry out the duties of the secretary and the offices.

(2) Utilize, with the consent of the other state agencies, the services and facilities of other state agencies without reimbursement.

(3) Accept in the name of the state, for use in carrying out the purposes of this article, any money or other property received as a gift, by bequest, or otherwise.

(4) Accept voluntary and uncompensated services.

(5) Expend money made available according to policies enforced by the budget agency.

(6) Establish and implement the policies and procedures necessary to implement this article.

(7) Advise the governor concerning rules adopted by a division.

(8) Create advisory bodies to advise the secretary about any matter relating to the implementation of this article.

(9) Perform other acts necessary to implement this article.

Sec. 8. (a) The secretary shall cooperate with the federal Social Security Administration and with any other agency of the federal government in any reasonable manner that may be necessary to qualify for federal aid for assistance to persons who are entitled to assistance under the provisions of the federal Social Security Act.

(b) The secretary shall do the following:

(1) Make reports in the form and containing the information required by the federal Social Security Administration Board or any other agency of the federal government.

(2) Comply with the requirements that the federal Social Security Administration Board or other agency of the federal government finds necessary to assure the correctness and verification of reports.

(c) The secretary shall act as the agent to the federal government in the following:

(1) Welfare matters of mutual concern.

(2) The administration of federal money granted to Indiana to aid the welfare functions of the state.

Sec. 9. Consistent with the powers and duties of the secretary

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under this article, the secretary may adopt rules under IC 4-22-2 relating to the exercise of those powers and duties.

Sec. 10. The office of the secretary is designated as the sole state agency responsible for administering programs concerning the vocational rehabilitation of individuals with a disability under 29 U.S.C. 701 et seq.

Sec. 11. (a) If:

(1) the sums appropriated by the general assembly in the biennial budget to the family and social services administration for the Medicaid assistance, Medicaid administration, public assistance (TANF), and the IMPACT (JOBS) work program are insufficient to enable the office of the secretary to meet its obligations; and

(2) the failure to appropriate additional funds would:

(A) violate a provision of federal law; or

(B) jeopardize the state's share of federal financial participation applicable to the state appropriations contained in the biennial budget for Medicaid assistance, Medicaid administration, public assistance (TANF), or the IMPACT (JOBS) work program;

then there are appropriated further sums as may be necessary to remedy a situation described in this subsection, subject to the approval of the budget director and the unanimous recommendation of the members of the budget committee. However, before approving a further appropriation under this subsection, the budget director shall explain to the budget committee the factors indicating that a condition described in subdivision (2) would be met.

(b) If:

(1) the sums appropriated by the general assembly in the biennial budget to the family and social services administration for Medicaid assistance, Medicaid administration, public assistance (TANF), and the IMPACT (JOBS) work program are insufficient to enable the family and social services administration to meet its obligations; and

(2) neither of the conditions in subsection (a)(2) would result from a failure to appropriate additional funds;

then there are appropriated further sums as may be necessary to remedy a situation described in this subsection, subject to the approval of the budget director and the unanimous recommendation of the members of the budget committee. However, before approving a further appropriation under this

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subsection, the budget director shall explain to the budget committee the factors indicating that a condition described in subdivision (2) would be met.

(c) Notwithstanding IC 12-14 and IC 12-15 (except for a clinical advisory panel established under IC 12-15), and except as provided in subsection (d), the office of the secretary may by rule adjust programs, eligibility standards, and benefit levels to limit expenditures from Medicaid assistance, Medicaid administration, public assistance (TANF), and the IMPACT (JOBS) work program to levels appropriated by the general assembly in the biennial budget. However, if there are additional appropriations under subsection (a) or (b), the office of the secretary may by rule adjust programs, eligibility standards, and benefit levels to limit expenditures from Medicaid assistance, Medicaid administration, public assistance (TANF), and the IMPACT (JOBS) work program to levels that are further appropriated under subsection (a) or (b). The office of the secretary may adopt emergency rules under IC 4-22-2-37.1 to make an adjustment authorized by this subsection. However, adjustments under this subsection may not:

- (1) violate a provision of federal law; or
- (2) jeopardize the state's share of federal financial participation applicable to the state appropriations contained in the biennial budget for Medicaid assistance, Medicaid administration, public assistance (TANF), and the IMPACT (JOBS) work program.

(d) Subject to IC 12-15-21-3, any adjustments made under subsection (c) must:

- (1) allow for a licensed provider under IC 12-15 to deliver services within the scope of the provider's license if the benefit is covered under IC 12-15; and
- (2) provide access to services under IC 12-15 from a provider under IC 12-15-12.

Sec. 12. (a) Subject to the appropriation limits established by the state's biennial budget for the office of the secretary and its divisions, and after assistance, including assistance under TANF (IC 12-14), medical assistance (IC 12-15), and food stamps (7 U.S.C. 2016(i)), is distributed to persons eligible to receive assistance, the secretary may adopt rules under IC 4-22-2 to offer programs on a pilot or statewide basis to encourage recipients of assistance under IC 12-14 to become self-sufficient and discontinue dependence on public assistance programs. Programs offered under this subsection may do the following:



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(1) Develop welfare-to-work programs.

(2) Develop home child care training programs that will enable recipients to work by providing child care for other recipients.

(3) Provide case management and supportive services.

(4) Develop a system to provide for public service opportunities for recipients.

(5) Provide plans to implement the personal responsibility agreement under IC 12-14-2-21.

(6) Develop programs to implement the school attendance requirement under IC 12-14-2-17.

(7) Provide funds for county planning council activities under IC 12-14-22-13 (repealed).

(8) Provide that a recipient may earn up to the federal income poverty level (as defined in IC 12-15-2-1) before assistance under this title is reduced or eliminated.

(9) Provide for child care assistance, with the recipient paying fifty percent (50%) of the local market rate as established under 45 CFR 256 for child care.

(10) Provide for medical care assistance under IC 12-15, if the recipient's employer does not offer the recipient health care coverage.

(b) If the secretary offers a program described in subsection (a), the secretary shall annually report the results and other relevant data regarding the program to the legislative council in an electronic format under IC 5-14-6.

Sec. 13. The office of the secretary shall implement methods to facilitate the payment of providers under IC 12-15.

Sec. 14. The office of the secretary shall improve its system through the use of technology and training of staff to do the following:

(1) Simplify, streamline, and destigmatize the eligibility and enrollment processes in all health programs serving children.

(2) Ensure an efficient provider payment system.

(3) Improve service to families.

(4) Improve data quality for program assessment and evaluation.

Sec. 15. (a) The office of the secretary shall:

(1) cooperate with; and

(2) assist;

a nonprofit organization with the purpose to implement and administer a program to provide health care to uninsured Indiana



1 residents.

2 (b) The office of the secretary shall assist a nonprofit
3 organization that has the purpose described in subsection (a) with
4 the following:

5 (1) Determining eligibility of potential participants who have
6 an income of not more than one hundred percent (100%) of
7 the federal poverty level for a program described in this
8 section.

9 (2) Issuing a plan card that is valid for one (1) year to an
10 individual if:

11 (A) the office of the secretary has determined the
12 individual is eligible for the program; and

13 (B) the individual has paid the office of the secretary a
14 registration fee determined by the office.

15 (3) Operating a toll free telephone number that provides
16 provider referral services for participants in the program.

17 (4) Implementing the program described in this section to
18 combine the resources of the office of the secretary and the
19 nonprofit organization in a manner that would not result in
20 the additional expenditure of state funds.

21 SECTION 13. IC 12-8-2.5 IS ADDED TO THE INDIANA CODE
22 AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
23 UPON PASSAGE]:

24 **Chapter 2.5. Family and Social Services Bodies**

25 **Sec. 0.3. (a)** Actions taken under IC 12-8-2 (expired), after
26 December 31, 2007, and before March 24, 2008, are legalized and
27 validated to the extent that those actions would have been legal and
28 valid if P.L.113-2008 had been enacted before January 1, 2008.

29 (b) Actions taken under IC 12-8-2 (expired) after June 30, 2011,
30 are legalized and validated to the extent that those actions would
31 have been legal and valid if IC 12-8-2 had not expired on June 30,
32 2011.

33 **Sec. 1.** As used in this chapter, "body" refers to an entity
34 described in section 3 of this chapter.

35 **Sec. 2.** As used in this chapter, "member" refers to a member of
36 a body.

37 **Sec. 3.** Unless otherwise provided by a statute, this chapter
38 applies to the following:

39 (1) The following advisory councils:

40 (A) The division of disability and rehabilitative services
41 advisory council.

42 (B) The division of family resources advisory council.



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(C) The division of mental health and addiction advisory council.

(2) A body:

(A) established by statute for a division; and

(B) whose enabling statute makes this chapter applicable to the body.

Sec. 3.5. Up to five (5) individuals appointed by the secretary to serve on an entity not described in section 3(1) of this chapter may be appointed to serve concurrently on an advisory council described in section 3(1) of this chapter. However, an individual may not serve concurrently on more than one (1) advisory council described in section 3(1) of this chapter.

Sec. 4. (a) This section applies only to a member who by statute is appointed to a fixed term.

(b) The term of an individual serving as a member begins on the latter of the following:

(1) The day the term of the member whom the individual is appointed to succeed expires. If the individual does not succeed a member, the member's term begins as provided in subdivision (2).

(2) The day the individual is appointed.

(c) The term of a member expires on July 1 of the second year after the expiration of the term of the member's immediate predecessor. If the member has no immediate predecessor, the term of the member expires on July 1 of the second year after the member's term began.

(d) A member may be reappointed for a new term. A reappointed member is the member's own:

(1) successor for purposes of subsection (b); and

(2) immediate predecessor for purposes of subsection (c).

Sec. 5. (a) This section applies only to an individual who serves as a member because of an office the individual holds.

(b) The individual serves as a member until the individual no longer holds the office.

Sec. 6. The appointing authority of a member shall appoint an individual to fill a vacancy in the office of the member.

Sec. 7. Except as provided in another statute, the governor shall appoint a voting member of the body to be the presiding officer of the body.

Sec. 8. Unless otherwise provided by a statute, a member is a voting member.

Sec. 9. A majority of the voting members of the body constitutes



1 a quorum.

2 Sec. 10. The affirmative vote of a majority of the voting
3 members of the body is required for the body to take any action.

4 Sec. 11. (a) A member who is not a state employee is entitled to
5 both of the following:

6 (1) The minimum salary per diem provided by
7 IC 4-10-11-2.1(b).

8 (2) Reimbursement for travel expenses and other expenses
9 actually incurred in connection with the member's duties, as
10 provided in the state travel policies and procedures
11 established by the Indiana department of administration and
12 approved by the budget agency.

13 (b) A member who is a state employee is entitled to
14 reimbursement for travel expenses and other expenses actually
15 incurred in connection with the member's duties, as provided in the
16 state travel policies and procedures established by the Indiana
17 department of administration and approved by the budget agency.

18 (c) A member who is a member of the general assembly is
19 entitled to receive the same per diem, mileage, and travel
20 allowances paid to members of the general assembly serving on
21 interim study committees established by the legislative council.

22 Sec. 11.5. In addition to the requirements of IC 5-14-1.5, the
23 office of the secretary or a division will make a good faith effort to
24 ensure that members of any body subject to this chapter receive a
25 copy of an agenda at least forty-eight (48) hours before any
26 meeting of the body.

27 SECTION 14. IC 12-8-6.5 IS ADDED TO THE INDIANA CODE
28 AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
29 UPON PASSAGE]:

30 **Chapter 6.5. Office of Medicaid Policy and Planning**

31 Sec. 0.3. (a) Actions taken under IC 12-8-6 (expired), after
32 December 31, 2007, and before March 24, 2008, are legalized and
33 validated to the extent that those actions would have been legal and
34 valid if P.L.113-2008 had been enacted before January 1, 2008.

35 (b) Actions taken under IC 12-8-6 (expired) after June 30, 2011,
36 are legalized and validated to the extent that those actions would
37 have been legal and valid if IC 12-8-6 had not expired on June 30,
38 2011.

39 Sec. 1. The office of Medicaid policy and planning is established.

40 Sec. 2. The secretary shall appoint an administrator responsible
41 for management of the office.

42 Sec. 3. The office is designated as the single state agency for



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1 administration of the state Medicaid program under IC 12-15.

2 Sec. 4. The office shall develop and coordinate Medicaid policy
3 for the state.

4 Sec. 5. The secretary may adopt rules under IC 4-22-2 to
5 implement this chapter and the state Medicaid program.

6 Sec. 6. (a) For purposes of IC 4-21.5, the secretary is the
7 ultimate authority for the state Medicaid program.

8 (b) The secretary shall adopt rules under IC 4-22-2 to specify
9 any additional necessary procedures for administrative review of
10 an agency action under IC 4-21.5 and the state Medicaid program.

11 Sec. 7. The office and the division of mental health and addiction
12 shall develop a written memorandum of understanding that
13 provides the following:

14 (1) Program responsibilities for the provision of care and
15 treatment for individuals with a mental illness.

16 (2) Responsibilities to educate and inform vendors of the
17 proper billing procedures.

18 (3) Responsibilities in administering the state plan.

19 (4) Responsibilities for Medicaid fiscal and quality
20 accountability and audits for mental health services.

21 (5) That the division shall recommend options and services to
22 be reimbursed under the state plan.

23 (6) That the office and the division agree that, within the
24 limits of 42 U.S.C. 1396 et seq., individuals with a mental
25 illness cannot be excluded from services on the basis of
26 diagnosis unless these services are otherwise provided and
27 reimbursed under the state plan.

28 (7) That the office shall seek review and comment from the
29 division before the adoption of rules or standards that may
30 affect the service, programs, or providers of medical
31 assistance services for individuals with a mental illness.

32 (8) That the division shall develop rate setting policies for
33 medical assistance services for individuals with a mental
34 illness.

35 (9) Policies to facilitate communication between the office and
36 the division.

37 (10) Any additional provisions that enhance communication
38 between the office and the division or facilitate more efficient
39 or effective delivery of mental health services.

40 Sec. 8. The office and the division of disability and rehabilitative
41 services shall develop a written memorandum of understanding
42 that provides the following:



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(1) Program responsibilities for the provision of care and treatment for individuals with a developmental disability and long term care recipients.

(2) Responsibilities to educate and inform vendors of the proper billing procedures.

(3) Responsibilities in administering the state plan.

(4) Responsibilities for Medicaid fiscal and quality accountability and audits for developmental disability and long term care services.

(5) That the division shall recommend options and services to be reimbursed under the state plan.

(6) That the office and the division agree that, within the limits of 42 U.S.C. 1396 et seq., individuals with a developmental disability and long term care recipients cannot be excluded from services on the basis of diagnosis unless these services are otherwise provided and reimbursed under the state plan.

(7) That the office shall seek review and comment from the division before the adoption of rules or standards that may affect the service, programs, or providers of medical assistance services for individuals with a developmental disability and long term care recipients.

(8) That the division shall develop rate setting policies for medical assistance services for individuals with a developmental disability and long term care recipients.

(9) That the office, with the assistance of the division, shall apply for waivers from the United States Department of Health and Human Services to fund community and home based long term care services as alternatives to institutionalization.

(10) Policies to facilitate communication between the office and the division.

(11) Any additional provisions that enhance communication between the office and the division or facilitate more efficient or effective delivery of developmental disability or long term care services.

Sec. 9. The office, the division of family resources, and the department of child services shall develop a written memorandum of understanding that provides the following:

(1) Program responsibilities for the provision of care and treatment for recipients served by the division.

(2) Responsibilities to educate and inform vendors of the

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proper billing procedures.

(3) Responsibilities in administering the state plan.

(4) Responsibilities for Medicaid fiscal and quality accountability and audits for services administered by the division.

(5) That the division shall recommend options and services to be reimbursed under the Medicaid state plan.

(6) That the office and the division agree that, within the limits of 42 U.S.C. 1396 et seq., recipients served by the division cannot be excluded from services on the basis of diagnosis unless these services are otherwise provided and reimbursed under the state plan.

(7) That the office shall seek review and comment from the division before the adoption of rules or standards that may affect the service, programs, or providers of medical assistance services for recipients served by the division.

(8) That the division shall develop rate setting policies for medical assistance services administered by the division.

(9) Policies to facilitate communication between the office and the division.

(10) Any additional provisions that enhance communication between the office and the division or facilitate more efficient or effective delivery of services.

Sec. 10. (a) The office shall reduce reimbursement rates for over-the-counter drugs by ten percent (10%) not later than July 1, 2001.

(b) The office shall implement a Maximum Allowable Cost schedule for off-patent drugs not later than November 1, 2001.

(c) Not later than January 1, 2002, the office shall implement an information strategy directed to high volume prescribers.

(d) Beginning July 1, 2002, the office shall phase in case management for aged, blind, and disabled Medicaid recipients.

Sec. 11. The office shall adopt rules to achieve the reductions needed to avoid expenditures exceeding the Medicaid appropriation made by P.L.224-2003 in the line item appropriation to the FAMILY AND SOCIAL SERVICES ADMINISTRATION, MEDICAID - CURRENT OBLIGATIONS. To the extent that reductions are made to optional Medicaid services as set forth in 42 U.S.C. 1396 et seq., the reductions may be accomplished on a pro rata basis with each optional service being reduced by a proportionate amount. However, the reductions may not be made in a manner that results in the elimination of any optional



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Medicaid service.

SECTION 15. IC 12-8-8.5 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]:

Chapter 8.5. Divisions and Directors

Sec. 0.3. (a) Actions taken under IC 12-8-8 (expired), after December 31, 2007, and before March 24, 2008, are legalized and validated to the extent that those actions would have been legal and valid if P.L.113-2008 had been enacted before January 1, 2008.

(b) Actions taken under IC 12-8-8 (expired) after June 30, 2011, are legalized and validated to the extent that those actions would have been legal and valid if IC 12-8-8 had not expired on June 30, 2011.

Sec. 1. Subject to the approval of the governor, the secretary:

(1) shall appoint each director; and

(2) may terminate the employment of a director.

Sec. 2. (a) A director is the chief administrator of the director's division.

(b) A director is responsible to the secretary for the operation and performance of the director's division.

Sec. 3. A director is the appointing authority for the director's division.

Sec. 4. (a) A director may adopt rules under IC 4-22-2 relating to the operation of the director's division and to implement the programs of the director's division.

(b) Whenever a division is required to adopt rules under IC 4-22-2, the director of the division is the statutory authority that adopts the rules.

Sec. 5. (a) A director is the ultimate authority under IC 4-21.5 for purposes of the operation of the director's division and the programs of the director's division.

(b) The director shall consult with the secretary on issues of family, social services, or health policy arising in a proceeding under IC 4-21.5.

Sec. 6. A director is responsible for development and presentation of the budget of the director's division.

SECTION 16. IC 12-9-1-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. ~~IC 12-8-8~~ **IC 12-8-8.5** applies to the division.

SECTION 17. IC 12-9-2-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The division shall be administered by a director appointed under ~~IC 12-8-8-1~~.



IC 12-8-8.5-1.

SECTION 18. IC 12-9-2-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. ~~IC 12-8-8~~ **IC 12-8-8.5** applies to the director.

SECTION 19. IC 12-9-4-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 4. Each member of the council appointed under section 3(2) of this chapter has a fixed term as provided in ~~IC 12-8-2-4~~. **IC 12-8-2.5-4.**

SECTION 20. IC 12-9-4-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 7. ~~IC 12-8-2~~ **IC 12-8-2.5** applies to the council.

SECTION 21. IC 12-9.1-1-2, AS ADDED BY P.L.141-2006, SECTION 38, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. ~~IC 12-8-8~~ **IC 12-8-8.5** applies to the division.

SECTION 22. IC 12-9.1-2-1, AS ADDED BY P.L.141-2006, SECTION 38, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The division shall be administered by a director appointed under ~~IC 12-8-8-1~~. **IC 12-8-8.5-1.**

SECTION 23. IC 12-9.1-2-2, AS ADDED BY P.L.141-2006, SECTION 38, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. ~~IC 12-8-8~~ **IC 12-8-8.5** applies to the director.

SECTION 24. IC 12-10-12-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 4. As used in this chapter, "office" refers to the office of Medicaid policy and planning established by ~~IC 12-8-6-1~~. **IC 12-8-6.5-1.**

SECTION 25. IC 12-12-1-4.1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 4.1. (a) The bureau may do the following:

(1) Establish vocational rehabilitation centers separately or in conjunction with community rehabilitation centers.

(2) Contract with governmental units and other public or private organizations to provide any of the vocational rehabilitation services permitted or required by this article, ~~IC 12-8-1-11~~, **IC 12-8-1.5-10**, IC 12-9-6, and IC 12-11-6.

(3) Provide or contract for the provision of other services that are consistent with the purposes of this article, ~~IC 12-8-1-11~~, **IC 12-8-1.5-10**, IC 12-9-6, and IC 12-11-6.

(b) When entering into contracts for job development, placement, or retention services, the bureau shall contract with governmental units and other public or private organizations or individuals that are

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1 accredited by one (1) of the following organizations:

2 (1) The Commission on Accreditation of Rehabilitation Facilities
3 (CARF), or its successor.

4 (2) The Council on Quality and Leadership in Supports for People
5 with Disabilities, or its successor.

6 (3) The Joint Commission on Accreditation of Healthcare
7 Organizations (JCAHO), or its successor.

8 (4) The National Commission on Quality Assurance, or its
9 successor.

10 (5) An independent national accreditation organization approved
11 by the secretary.

12 (c) To the extent that the accreditation requirements of an
13 accrediting organization listed in subsection (b) do not cover a specific
14 requirement determined by the bureau to be necessary for a contracted
15 service under subsection (a), the bureau shall include these specific
16 requirements as part of the bureau's contract for job development,
17 placement, or retention services.

18 SECTION 26. IC 12-12.7-2-8, AS ADDED BY P.L.93-2006,
19 SECTION 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
20 UPON PASSAGE]: Sec. 8. (a) The council consists of at least fifteen
21 (15) but not more than twenty-five (25) members appointed by the
22 governor as follows:

23 (1) At least twenty percent (20%) of the members must be
24 individuals who:

25 (A) are parents, including minority parents, of infants or
26 toddlers with disabilities or of children who are less than
27 thirteen (13) years of age with disabilities; and

28 (B) have knowledge of or experience with programs for infants
29 and toddlers with disabilities.

30 At least one (1) of the members described in this subdivision must
31 be a parent of an infant or toddler with a disability or of a child
32 less than seven (7) years of age with a disability.

33 (2) At least twenty percent (20%) of the members must be public
34 or private providers of early intervention services.

35 (3) At least one (1) member must be a member of the general
36 assembly.

37 (4) Each of the state agencies involved in the provision of or
38 payment for early intervention services to infants and toddlers
39 with disabilities and their families must be represented by at least
40 one (1) member. The members described in this subdivision must
41 have sufficient authority to engage in policy planning and
42 implementation on behalf of the state agency the member

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represents.

(5) At least one (1) member must be involved in personnel preparation.

(6) At least one (1) member must:

(A) represent a state educational agency responsible for preschool services to children with disabilities; and

(B) have sufficient authority to engage in policy planning and implementation on behalf of the agency.

(7) At least one (1) member must represent the department of insurance created by IC 27-1-1-1.

(8) At least one (1) member must represent an agency or program that is:

(A) located in Indiana; and

(B) authorized to participate in the Head Start program under 42 U.S.C. 9831 et seq.

(9) At least one (1) member must represent a state agency responsible for child care.

(10) At least one (1) member must represent the office of Medicaid policy and planing established by ~~IC 12-8-6-1~~. **IC 12-8-6.5-1.**

(11) At least one (1) member must be a representative designated by the office of coordinator for education of homeless children and youths.

(12) At least one (1) member must be a state foster care representative from the department of child services established by ~~IC 31-33-1.5-2~~. **IC 31-25-1-1.**

(13) At least one (1) member must represent the division of mental health and addiction established by IC 12-21-1-1.

(b) To the extent possible, the governor shall ensure that the membership of the council reasonably represents the population of Indiana.

SECTION 27. IC 12-13-1-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. ~~IC 12-8-8~~ **IC 12-8-8.5** applies to the division.

SECTION 28. IC 12-13-2-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The division shall be administered by a director appointed under ~~IC 12-8-8-2~~. **IC 12-8-8.5-1.**

SECTION 29. IC 12-13-4-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 4. Each member of the council appointed under section 3(2) of this chapter has a fixed term as provided in ~~IC 12-8-2-4~~. **IC 12-8-2.5-4.**



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1 SECTION 30. IC 12-13-4-7 IS AMENDED TO READ AS
 2 FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 7. ~~IC 12-8-2~~
 3 **IC 12-8-2.5** applies to the council.

4 SECTION 31. IC 12-13-15.2-2 IS AMENDED TO READ AS
 5 FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. The division
 6 shall collaborate with the office of Medicaid policy and planning
 7 established by ~~IC 12-8-6-1~~ **IC 12-8-6.5-1** and the state department of
 8 health established by IC 16-19-1-1 to establish programs that facilitate
 9 children's access to oral health services.

10 SECTION 32. IC 12-14-2-21, AS AMENDED BY P.L.161-2007,
 11 SECTION 22, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 12 UPON PASSAGE]: Sec. 21. (a) A TANF recipient or the parent or
 13 essential person of a TANF recipient, if the TANF recipient is less than
 14 eighteen (18) years of age, must sign a personal responsibility
 15 agreement to do the following:

- 16 (1) Develop an individual self-sufficiency plan with other family
- 17 members and a caseworker.
- 18 (2) Accept any reasonable employment as soon as it becomes
- 19 available.
- 20 (3) Agree to a loss of assistance, including TANF assistance
- 21 under this article, if convicted of a felony under IC 35-43-5-7 or
- 22 IC 35-43-5-7.1 for ten (10) years after the conviction.
- 23 (4) Subject to section 5.3 of this chapter, understand that
- 24 additional TANF assistance under this article will not be available
- 25 for a child born more than ten (10) months after the person
- 26 qualifies for assistance.
- 27 (5) Accept responsibility for ensuring that each child of the
- 28 person receives all appropriate vaccinations against disease at an
- 29 appropriate age.
- 30 (6) If the person is less than eighteen (18) years of age and is a
- 31 parent, live with the person's parents, legal guardian, or an adult
- 32 relative other than a parent or legal guardian in order to receive
- 33 public assistance.
- 34 (7) Subject to ~~IC 12-8-1-12~~ **IC 12-8-1.5-11** and section 5.1 of this
- 35 chapter, agree to accept assistance for not more than twenty-four
- 36 (24) months under the TANF program (IC 12-14).
- 37 (8) Be available for and actively seek and maintain employment.
- 38 (9) Participate in any training program required by the division.
- 39 (10) Accept responsibility for ensuring that the person and each
- 40 child of the person attend school until the person and each child
- 41 of the person graduate from high school or attain a high school
- 42 equivalency certificate (as defined in IC 12-14-5-2).



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(11) Raise the person's children in a safe, secure home.

(12) Agree not to abuse illegal drugs or other substances that would interfere with the person's ability to attain self-sufficiency.

(b) Except as provided in subsection (c), assistance under the TANF program shall be withheld or denied to a person who does not fulfill the requirements of the personal responsibility agreement under subsection (a).

(c) A person who is granted an exemption under section 23 of this chapter may be excused from specific provisions of the personal responsibility agreement as determined by the director.

SECTION 33. IC 12-15-2-0.5, AS AMENDED BY P.L.1-2010, SECTION 58, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 0.5. (a) This section applies to a person who qualifies for assistance:

(1) under sections 13 through 16 of this chapter;

(2) under section 6 of this chapter when the person becomes ineligible for medical assistance under IC 12-14-2-5.1 or IC 12-14-2-5.3; or

(3) as an individual with a disability if the person is less than eighteen (18) years of age and otherwise qualifies for assistance.

(b) Notwithstanding any other law, the following may not be construed to limit health care assistance to a person described in subsection (a):

(1) ~~IC 12-8-1-13~~; **IC 12-8-1.5-12.**

(2) IC 12-14-1-1.

(3) IC 12-14-1-1.5.

(4) IC 12-14-2-5.1.

(5) IC 12-14-2-5.2.

(6) IC 12-14-2-5.3.

(7) IC 12-14-2-17.

(8) IC 12-14-2-18.

(9) IC 12-14-2-20.

(10) IC 12-14-2-21.

(11) IC 12-14-2-24.

(12) IC 12-14-2-25.

(13) IC 12-14-2-26.

(14) IC 12-14-2.5.

(15) IC 12-14-5.5.

(16) Section 21 of this chapter.

SECTION 34. IC 12-21-1-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. ~~IC 12-8-8~~ **IC 12-8-8.5** applies to the division.

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1 SECTION 35. IC 12-21-2-1 IS AMENDED TO READ AS
 2 FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The division
 3 shall be administered by a director appointed under ~~IC 12-8-8-1~~.
 4 **IC 12-8-8.5-1.**

5 SECTION 36. IC 12-21-2-2 IS AMENDED TO READ AS
 6 FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. ~~IC 12-8-8~~
 7 **IC 12-8-8.5** applies to the director.

8 SECTION 37. IC 12-21-2-3, AS AMENDED BY P.L.143-2011,
 9 SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 10 UPON PASSAGE]: Sec. 3. In addition to the general authority granted
 11 to the director under ~~IC 12-8-8~~, **IC 12-8-8.5**, the director shall do the
 12 following:

13 (1) Organize the division, create the appropriate personnel
 14 positions, and employ personnel necessary to discharge the
 15 statutory duties and powers of the division or a bureau of the
 16 division.

17 (2) Subject to the approval of the state personnel department,
 18 establish personnel qualifications for all deputy directors,
 19 assistant directors, bureau heads, and superintendents.

20 (3) Subject to the approval of the budget director and the
 21 governor, establish the compensation of all deputy directors,
 22 assistant directors, bureau heads, and superintendents.

23 (4) Study the entire problem of mental health, mental illness, and
 24 addictions existing in Indiana.

25 (5) Adopt rules under IC 4-22-2 for the following:

26 (A) Standards for the operation of private institutions that are
 27 licensed under IC 12-25 for the diagnosis, treatment, and care
 28 of individuals with psychiatric disorders, addictions, or other
 29 abnormal mental conditions.

30 (B) Licensing or certifying community residential programs
 31 described in IC 12-22-2-3.5 for individuals with serious
 32 mental illness (SMI), serious emotional disturbance (SED), or
 33 chronic addiction (CA) with the exception of psychiatric
 34 residential treatment facilities.

35 (C) Certifying community mental health centers to operate in
 36 Indiana.

37 (D) Establish exclusive geographic primary service areas for
 38 community mental health centers. The rules must include the
 39 following:

40 (i) Criteria and procedures to justify the change to the
 41 boundaries of a community mental health center's primary
 42 service area.

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- 1 (ii) Criteria and procedures to justify the change of an
- 2 assignment of a community mental health center to a
- 3 primary service area.
- 4 (iii) A provision specifying that the criteria and procedures
- 5 determined in items (i) and (ii) must include an option for
- 6 the county and the community mental health center to
- 7 initiate a request for a change in primary service area or
- 8 provider assignment.
- 9 (iv) A provision specifying the criteria and procedures
- 10 determined in items (i) and (ii) may not limit an eligible
- 11 consumer's right to choose or access the services of any
- 12 provider who is certified by the division of mental health
- 13 and addiction to provide public supported mental health
- 14 services.
- 15 (6) Institute programs, in conjunction with an accredited college
- 16 or university and with the approval, if required by law, of the
- 17 commission for higher education, for the instruction of students
- 18 of mental health and other related occupations. The programs may
- 19 be designed to meet requirements for undergraduate and
- 20 postgraduate degrees and to provide continuing education and
- 21 research.
- 22 (7) Develop programs to educate the public in regard to the
- 23 prevention, diagnosis, treatment, and care of all abnormal mental
- 24 conditions.
- 25 (8) Make the facilities of the Larue D. Carter Memorial Hospital
- 26 available for the instruction of medical students, student nurses,
- 27 interns, and resident physicians under the supervision of the
- 28 faculty of the Indiana University School of Medicine for use by
- 29 the school in connection with research and instruction in
- 30 psychiatric disorders.
- 31 (9) Institute a stipend program designed to improve the quality
- 32 and quantity of staff that state institutions employ.
- 33 (10) Establish, supervise, and conduct community programs,
- 34 either directly or by contract, for the diagnosis, treatment, and
- 35 prevention of psychiatric disorders.
- 36 (11) Adopt rules under IC 4-22-2 concerning the records and data
- 37 to be kept concerning individuals admitted to state institutions,
- 38 community mental health centers, or other providers.
- 39 (12) Compile information and statistics concerning the ethnicity
- 40 and gender of a program or service recipient.
- 41 (13) Establish standards for services described in IC 12-7-2-40.6
- 42 for community mental health centers and other providers.

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1 SECTION 38. IC 16-28-15-5, AS ADDED BY P.L.229-2011,
2 SECTION 162, IS AMENDED TO READ AS FOLLOWS
3 [EFFECTIVE UPON PASSAGE]: Sec. 5. As used in this chapter,
4 "office" refers to the office of Medicaid policy and planning established
5 by ~~IC 12-8-6-1~~ **IC 12-8-6.5-1**.
6 SECTION 39. IC 22-4.1-17-6, AS ADDED BY P.L.110-2010,
7 SECTION 34, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
8 UPON PASSAGE]: Sec. 6. As used in this chapter, "secretary" refers
9 to the secretary of family and social services appointed under
10 ~~IC 12-8-1-2~~ **IC 12-8-1.5-2**.
11 SECTION 40. **An emergency is declared for this act.**

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COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 12, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 3, line 2, delete "IC 12-8-1.5-11." and insert **"IC 12-8-1.5-11 or in order to comply with the federal Patient Protection and Affordable Care Act."**

Page 4, strike lines 11 through 16.

Page 5, line 22, strike "(a)(19), (a)(20),".

Page 5, line 23, strike "(a)(21)," and insert **"or"**.

Page 5, line 23, after "(a)(29)" delete ",".

Page 5, line 23, strike "or (a)(37)".

Page 7, line 42, delete "(a)".

Page 8, delete lines 3 through 5.

Page 10, line 2, delete "(a)".

Page 10, delete lines 5 through 9.

Page 11, line 17, delete "." and insert **"to levels appropriated by the general assembly in the biennial budget. However, if there are additional appropriations under subsection (a) or (b), the office of the secretary may by rule adjust programs, eligibility standards, and benefit levels to limit expenditures from Medicaid assistance, Medicaid administration, public assistance (TANF), and the IMPACT (JOBS) work program to levels that are further appropriated under subsection (a) or (b)."**

Page 18, line 33, delete "emergency rules under" and insert **"rules"**.

Page 18, line 34, delete "IC 4-22-2-37.1".

Page 27, delete lines 1 through 7.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 12 as introduced.)

MILLER, Chairperson

Committee Vote: Yeas 6, Nays 1.



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SENATE MOTION

Madam President: I move that Senate Bill 12 be amended to read as follows:

Page 5, delete line 42, begin a new paragraph and insert:

"SECTION 3. IC 12-7-1-5, AS ADDED BY P.L.220-2011, SECTION 252, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2012]: Sec. 5. Actions taken under IC 12-8-1 (**expired**), IC 12-8-2 (**expired**), IC 12-8-6 (**expired**), and IC 12-8-8 (**expired**) after June 30, 1999, and before December 1, 1999, are legalized and validated to the extent that those actions would have been legal and valid if P.L.7-2000 had been enacted before July 1, 1999."

Page 6, delete lines 1 through 7.

Page 10, line 21, after "(JOBS)" insert "**work**".

Re-number all SECTIONS consecutively.

(Reference is to SB 12 as printed January 26, 2012.)

MILLER

 COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred Senate Bill 12, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

BROWN T, Chair

Committee Vote: yeas 9, nays 1.



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